

81402-1

8/21/2014

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, D.C. 20460

OFFICE OF  
CHEMICAL SAFETY  
AND POLLUTION PREVENTION

AUG 21 2014

Ms. Sharon M. Johnston  
Traveler's Supply, Inc.  
115 York Street  
West Springfield, MA 01089

Subject: Label Notification(s) for Pesticide Registration 98-10

Dear Ms. Johnston:

Subject: Notification to Make Label Change  
EPA Registration Number: 81402-1  
Date of Submission: August 1, 2014  
Decision: 494169

The Agency is in receipt of your Application for Pesticide Notification under Pesticide Registration Notice (PRN) 98-10 dated August 1, 2014 for the product Traveler's Supply Inc. Permethrin Clothing & Gear Insect Repellent. The Registration Division (RD) has conducted a review of this request for its applicability under PRN 98-10 and finds that the action(s) requested fall within the scope of PRN 98-10. The label submitted with the application has (have been stamped "Notification" and will be placed in our records.

If you have any questions, please contact Melody Banks on 703 305-5413 or via E-mail at [banks.melody@epa.gov](mailto:banks.melody@epa.gov).

Sincerely,

A handwritten signature in black ink, appearing to read "Richard Gebken".

Richard Gebken  
Product Manager  
Insecticide Branch  
Registration Division (7504P)



United States  
**Environmental Protection Agency**  
 Washington, DC 20460

<input type="checkbox"/>	Registration
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Other

OPP Identifier Number

**Application for Pesticide - Section I**

1. Company/Product Number 81402-1		2. EPA Product Manager Richard Gebken		3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted	
4. Company/Product (Name) Traveler's Supply Inc. Permethrin Clothing & Gear Insect Repellent		PM# 10			
5. Name and Address of Applicant (Include ZIP Code) Traveler's Supply, Inc. 115 York Street West Springfield, MA 01089  <input checked="" type="checkbox"/> Check if this is a new address			6. Expedited Review. In accordance with FIFRA Section 3(c)(3)(b)(i), my product is similar or identical in composition and labeling to: EPA Reg. No. <u>AUG 2 1 2014</u> Product Name _____		

**Section - II**

<input type="checkbox"/> Amendment - Explain below.	<input type="checkbox"/> Final printed labels in response to Agency letter dated _____
<input type="checkbox"/> Resubmission in response to Agency letter dated _____	<input type="checkbox"/> "Me Too" Application.
<input checked="" type="checkbox"/> Notification - Explain below.	<input type="checkbox"/> Other - Explain below.

**Explanation: Use additional page(s) if necessary. (For section I and Section II.)**

This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40 CFR 152.46 and no other changes have been made to the labeling or the confidential statement of formula of this product. I understand that it is a violation of 18 U.S.C. Sec. 1001 to willfully make any false statement to EPA. I further understand that if this notification is not consistent with the terms of PR Notice 98-10 and 40 CFR 152.46, this product may be in violation of FIFRA and I may be subject to enforcement action and penalties under sections 12 and 14 of FIFRA.

Notification of clarification of directions for use per PR Notice 98-10 II. N.

**Section - III**

1. Material This Product Will Be Packaged In:					
Child-Resistant Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Unit Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Water Soluble Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
* Certification must be submitted		If "Yes" Unit Packaging wgt.		No. per container	
		If "Yes" Package wgt		No. per container	
2. Type of Container <input type="checkbox"/> Metal <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) _____			3. Location of Net Contents Information <input checked="" type="checkbox"/> Label <input type="checkbox"/> Container		
4. Size(s) Retail Container 6.0 ounces - 1 quart			5. Location of Label Directions <input checked="" type="checkbox"/> On label		
6. Manner in Which Label is Affixed to Product <input checked="" type="checkbox"/> Lithograph Paper glued <input type="checkbox"/> Stenciled			<input type="checkbox"/> Other _____		

**Section - IV**

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)		
Name Sharon M. Johnston	Title Regulatory Consultant	Telephone No. (Include Area Code) (866) 662-2483
<b>Certification</b> I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.		6. Date Application Received (Stamped)
2. Signature 	3. Title Regulatory Consultant	
4. Typed Name Sharon M. Johnston	5. Date August 1, 2014	



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{Note To Reviewer: This product is in category IV for all routes of exposure and the following First Aid statements may be omitted from the final container label}

**FIRST AID**

<b>If swallowed:</b>	<ul style="list-style-type: none"> <li>· Call a poison control center or doctor immediately for treatment advice.</li> <li>· Have person sip a glass of water if able to swallow.</li> <li>· Do not induce vomiting unless told to by a poison control center or doctor.</li> <li>· Do not give anything to an unconscious person.</li> </ul>
<b>If inhaled:</b>	<ul style="list-style-type: none"> <li>· Move person to fresh air.</li> <li>· If not breathing, call 911 or an ambulance, then give artificial respiration, preferably mouth-to-mouth if possible.</li> <li>· Call a poison control center or doctor for further treatment advice.</li> </ul>
<b>If on skin:</b>	<ul style="list-style-type: none"> <li>· Take off contaminated clothing.</li> <li>· Rinse skin immediately with plenty of water for 15-20 minutes.</li> <li>· Call a poison control center or doctor for treatment advice.</li> </ul>
<b>If in eyes:</b>	<ul style="list-style-type: none"> <li>· Hold eye open and rinse slowly and gently with water for 15-20 minutes.</li> <li>· Remove contact lenses, if present, after the first 5 minutes, then continue rinsing.</li> <li>· Call a poison control center or doctor for treatment advice.</li> </ul>

**HOT LINE NUMBER**

Have the product container or label with you when calling a poison control center or doctor or going for treatment. You may also contact 1-800-222-1222 for emergency treatment information.

**PRECAUTIONARY STATEMENTS**

{ Note To Reviewer: This product is in category IV for all routes of exposure and the following Hazards To Humans & Domestic Animals section may be omitted from the final container label}

**Hazards To Humans & Domestic Animals**

**Caution:** Harmful if swallowed. Avoid contact with skin and eyes. Avoid breathing vapors or spray mist. Wash thoroughly with soap and water after handling and before eating, drinking, chewing gum, using tobacco or using the toilet. Do not use on humans.

**ENVIRONMENTAL HAZARDS**

This pesticide is extremely toxic to aquatic organisms, including fish and invertebrates. To protect the environment, do not allow pesticide to enter or run off into storm drains, drainage ditches, gutters or surface waters. Applying this product in calm weather when rain is not predicted for the next 24 hours will help to ensure that wind or rain does not blow or wash pesticide off the treatment area.

This pesticide is highly toxic to bees exposed to direct treatment on blooming crops or weeds. Do not apply this product or allow it to drift to blooming crops or weeds while bees are actively visiting the treatment area.

**DIRECTIONS FOR USE**

It is a violation of Federal Law to use this product in a manner inconsistent with its labeling.

**Precautions and Restrictions:**

Do not apply this product in a way that will contact children, either directly or through drift. Except when applying to clothing, do not allow adults or pets to enter until sprays have dried.

Do not apply this product in a way that will contact children, either directly or through drift. Except when applying to clothing, do not apply this product in a way that will contact adults or pests, either directly or through drift.

Do not make applications during rain.

**GENERAL CLOTHING INSTRUCTIONS**

Shake well before using.

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This product must not be applied to clothing while it is being worn. Under no circumstances should bare skin or clothing on the body be treated. Do not treat underwear, hats, caps or inner clothing. Make all applications outdoors.

For protection against ticks (including those which may carry Lyme disease), chiggers and mosquitoes, apply product as directed below. For further protection, use in conjunction with an insect repellent registered for direct application to skin and applied to uncovered exposed areas and utilize the following primary preventive measures. Avoid walking in areas where the pests are found, wear appropriate protective clothing (light-colored, long sleeved shirt and long pants tucked into socks) and inspect body daily for ticks. Pant cuffs should be worn inside the socks or footwear to ensure full protection against ticks and chiggers.

**INITIAL SPRAYING TREATMENT INSTRUCTIONS:**

[Affix trigger pump or the pump sprayer to container for application.]

A test application should be made to fabric in an inconspicuous place [area] before use.

1. Select a well-ventilated outdoor area protected from wind and lay out [hang] the clothing to be treated (a complete outfit is shirt, pants [trousers] and socks).
2. [Affix trigger sprayer or turn nozzle to unlock for application.] Hold container about 6-8 inches from surface of the clothing and spray to lightly moisten the entire surface of the fabric.
3. Continue spraying over entire outfit, until the outer surface of the fabric is moist enough to cause a slight color change or darkening. Pay special attention to socks, pant [trouser] cuffs and shirt cuffs.
4. Turn the clothing over and treat the other side as described in Steps 2 & 3.
5. Hang the treated clothing and allow to dry for at least 2 hours (4 hours under humid conditions) before wearing.
6. Six ounces will treat one complete [an average] outfit.

OR

{for 6 ounce containers} (directions may be modified for larger containers as long as treatment rate remains the same.)

**INITIAL SOAKING INSTRUCTIONS:**

Pour entire contents of bottle into the treatment bag provided. Fill bottle twice with water and pour into bag. Seal bag and shake thoroughly. Roll garments (shirt, trousers and/or bed net) tightly. Place rolled up garments (shirt, trousers and/or bed net) into the bag and seal the closure. Shake bag to provide uniform coverage. Let stand 2 hours or more. Wearing water-proof gloves, open bag and remove garments. Hang outdoors until dry (approximately 2-3 hours). When dry, garment is ready to wear. Follow standard laundering procedures. Clothing should be retreated after six weeks or after the 6<sup>th</sup> laundering to maintain adequate protection.

**INITIAL TREATMENT INSTRUCTIONS ON NETS, TENTS, SLEEPING BAGS AND BACKPACKS: Do not treat inside of sleeping bag. Spray exterior surfaces of tent only.**

Select a well-ventilated outdoor area protected from wind and lay out [or hang] article to be treated. Hold container upright about 6-8 inches from surface of the article and spray to lightly moisten the surface of the fabric. Continue spraying over entire article, until the outer surface of the article is moist enough to cause a light color change or darkening. Turn the article over and treat the other side as described above. Hang the treated article and allow to dry for at least 2 hours (4 hours under humid conditions) before using.

**RETREATMENT INSTRUCTIONS:**

This product contains an active ingredient which actually binds to the fabric being treated, providing residual protection which lasts for six weeks, and holds up through several machine washings. DO NOT RETREAT CLOTHING (OR ARTICLES) MORE THAN ONCE EVERY TWO WEEKS. LAUNDRER CLOTHING AT LEAST ONCE BEFORE RETREATING. For re-treatment, follow instructions for initial treatment.

**STORAGE & DISPOSAL**

Do not contaminate water or food by storage or disposal.

**Pesticide Storage:** Store in a cool dry area away from children and pets.

**Pesticide Disposal and Container Handling:** If empty: Non-refillable container. Do not reuse or refill this container. Place in trash or offer for recycling if available. If partly filled: Call your local solid waste agency for disposal instructions. Never place unused product down any indoor or outdoor drain.

To the extent consistent with applicable law, buyer assumes all responsibilities for safety and use, not in strict accordance with

Permanone is a registered trademark of Bayer AG.

Traveler's Supply, Inc., 2024R Westover Road, Chicopee, MA  
04022 115 York Street, West Springfield, MA 01089

[ ] Denote alternate text in addition to any subset of the directions for use.